

DATE SUBMITTED:

10/7/83

PERMIT #

24183

FEE

\$500

PLANNING CLEARANCE

GRAND JUNCTION PLANNING DEPARTMENT

BLDG ADDRESS: 2604 N 7TH

SQ. FT. OF BLDG: ADD on 80 SQ FT

SUBDIVISION: _____

SQ. FT. OF LOT: 14272

FILING # _____ BLK # _____ LOT # _____

NUMBER OF FAMILY UNITS: 1

TAX SCHEDULE NUMBER:

NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:

2945-111-00-034-1

5

PROPERTY OWNER: MAUDE BAKER ELDRIDGE

USE OF ALL EXISTING BUILDINGS:

ADDRESS: 2604 N 7TH

1 HOUSE - 1 GARAGE 3 STORAGE

PHONE: 243-9474

DESCRIPTION OF WORK AND INTENDED USE:

SUBMITTALS REQ'D: TWO (2) PLOT PLANS SHOWING PARKING, LANDSCAPING, SETBACKS TO ALL PROPERTY LINES, AND ALL STREETS WHICH ABUT THE PARCEL.

ADD BATHROOM RESIDU

FOR OFFICE USE ONLY

ZONE: B-1

FLOODPLAIN: YES _____ NO X

SETBACKS: F 20 S 5/5 R 15

GEOLOGIC HAZARD: YES _____ NO X

MAXIMUM HEIGHT: _____

CENSUS TRACT #: 5

PARKING SPACES REQ'D: _____

TRAFFIC ZONE: 27

LANDSCAPING/SCREENING: _____

SPECIAL CONDITIONS: _____

ANY MODIFICATION TO THIS APPROVED PLANNING CLEARANCE MUST BE APPROVED, IN WRITING, BY THE DEPARTMENT. THE STRUCTURE APPROVED BY THIS APPLICATION CANNOT BE OCCUPIED UNTIL A CERTIFICATE OF OCCUPANCY (C.O.) IS ISSUED BY THE BUILDING DEPARTMENT (SECTION 307, UNIFORM BUILDING CODE.)

ANY LANDSCAPING REQUIRED BY THIS PERMIT SHALL BE MAINTAINED IN AN ACCEPTABLE AND HEALTHY CONDITION. THE REPLACEMENT OF ANY VEGETATION MATERIALS THAT DIE OR ARE IN AN UNHEALTHY CONDITION SHALL BE REQUIRED.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THE ABOVE IS CORRECT AND I AGREE TO COMPLY WITH THE REQUIREMENTS ABOVE. FAILURE TO COMPLY SHALL RESULT IN LEGAL ACTION.

DATE APPROVED: 10/7/83

APPROVED BY: [Signature]

Maude Eldridge
SIGNATURE

**APPLICATION FOR BUILDING PERMIT
BUILDING DEPARTMENT**

CITY V
COUNTY _____

Permit No _____
DATE _____

TO BE FILLED OUT BY APPLICANT

PLOT PLAN

VALUATION _____

NOTE: Show Easements, Property Line Dimensions, All Other Structures, Specify North, and Street Name. For Odd Shaped Lots, Provide Separate Plot Plan.

LEGAL DESCRIP.	BLDG ADDRESS <u>2604 N 7TH</u>
	SUBDIVISION <u>Mesa St. Rewards</u>
	FILING NO _____ LOT NO _____ BLK NO _____
	TAX SCHEDULE NO <u>2945-111-00-034-1</u>
OWNER	NAME <u>MAUDE ELDRIDGE</u>
	MAIL ADDRESS <u>2604 N 7TH</u>
	CITY <u>C. J.</u> PHONE <u>943-9474</u>
ARCH ENGINEER	NAME _____
	MAIL ADDRESS _____
	CITY _____
CONTRACTOR	NAME _____
	ADDRESS _____
	CITY _____
	LICENSE NO _____ PHONE _____

CLASS OF WORK

NEW _____ REMODEL _____ ADDITION
 REPAIR _____ MOVE-ON _____ OTHER _____
 Sq Ft of Bldg _____ Sq Ft of Lot _____
 No of Floors 1 Height _____
 No of Family Units 1 No of Bedrooms 2

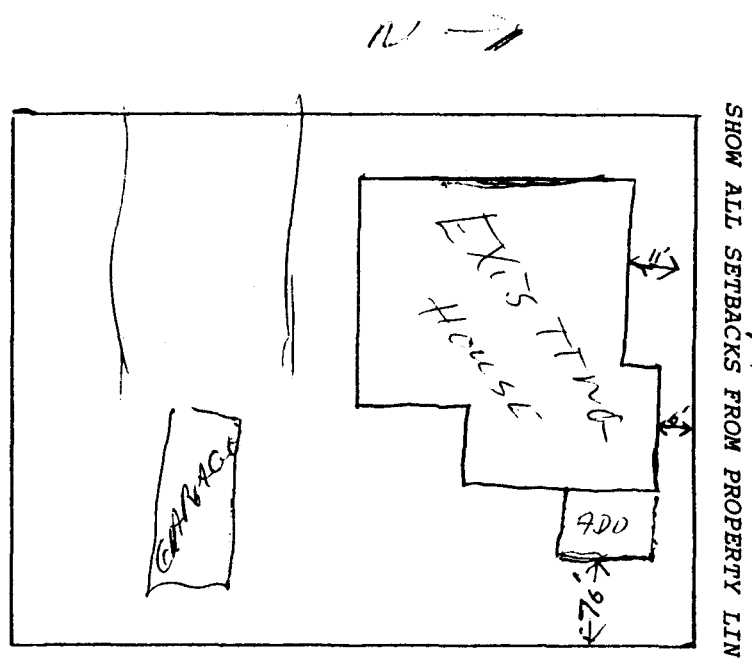
Occupancy:
 Residence
 Mobile Home _____
 (HUD No.) _____
 Commercial _____
 Other _____

GARAGE: _____ CARPORT: _____
 Single Dble Single Dble
 FIREPLACE _____ WOODSTOVE _____

Are Building Materials to be purchased outside Mesa County? Yes _____ No
 State Sales Tax # _____

DOCUMENTS REQUIRED

Radon Survey (248-7164)
 Building Plans
 _____ Sanitary Sewer Clearance
 _____ On-Site Sewage Disposal Permit
 Fire Flow Survey
 Planning
 _____ Energy
 _____ Food Handling - County Health Dept.
 _____ Other _____



SHOW ALL SETBACKS FROM PROPERTY LINES

Description of Work Planned: ADD BATHROOM

I hereby acknowledge that I have read this application and the above is correct and I agree to comply with all city and county ordinances and state laws regulating building construction.

NOTE TO APPLICANT: Reverse side of this form must be completed.

X Maude Eldridge
SIGNATURE

FOR OFFICE USE ONLY

Approval Date _____ Bldg Dept By _____
 Special Conditions _____